

# California Medi-Connect Program – An Overview of the Coordinated Care Initiative in San Bernardino County

April 4, 2013



# Overview of Medi-Cal

- State/Federal program for low-income individuals, including families with children, youth in foster care, seniors, and people with disabilities
- Covered services: hospital inpatient, outpatient, physician services, and custodial level long-term care
- Optional services that are covered in California:
  - Prescription drugs
  - Durable Medical Equipment
  - Home and Community-Based Services (HCBS)



# Long-Term Services and Supports

(Medi-Cal Benefit)

- Community-Based Adult Services
- Multipurpose Senior Services Program
- In-Home Support Services
- Other LTSS “In Lieu of Institutional Care”
- Nursing Facility – custodial level care
- Coordination with behavioral health
- Coordination with other HCBS outside of Medi-Cal



# Overview of Medicare

- Medicare is the Federal health care program for:
  - Individuals age 65+
  - Individuals under 65 with disabilities meeting specified requirements (Social Security Disability/24 months)
  - Individuals with End Stage Renal Disease (ESRD)
- Medicare covers:
  - Part A: Hospital Insurance (inpatient, SNF)
  - Part B: Medical Insurance (outpatient, physician services, DME, and home health)
  - Part C: Medicare Advantage (managed care plan Parts A, B, & D)
  - Part D: Medicare prescription drug coverage



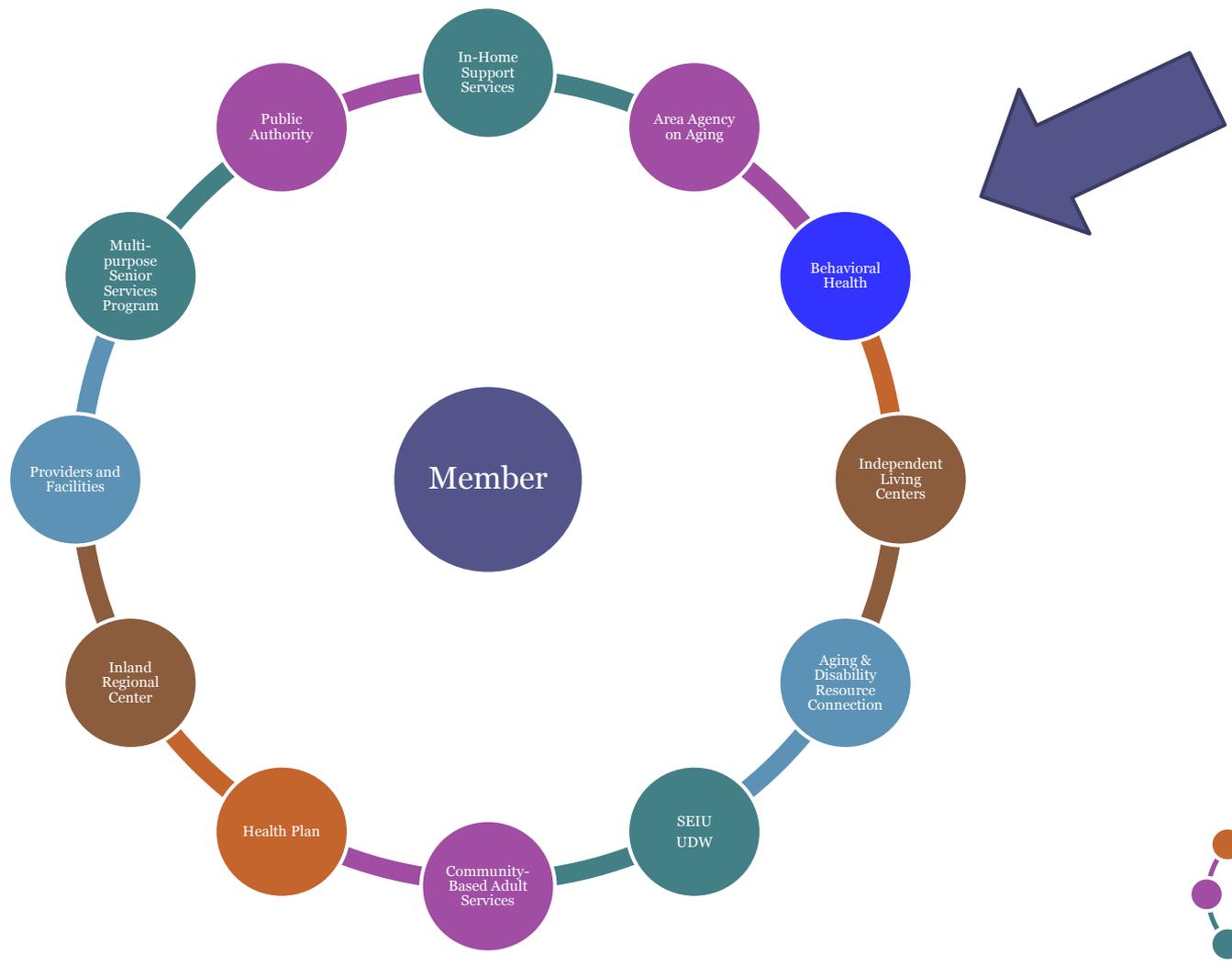
# Medi-Cal Fee-For-Service and Managed Care

## Two systems administer Medi-Cal health care delivery

- **Medi-Cal Fee-for-Service:**
  - Individuals obtain services from participating Medi-Cal providers
  - Provider receives payment for each service from the State
- **Medi-Cal Managed Care: (IEHP & Molina)**
  - Managed care organizations (MCO) are responsible for Medi-Cal benefits
  - Health Plan receives capitated payments based on per member/per month
  - Health Plan contracts for or directly delivers health care services for members.

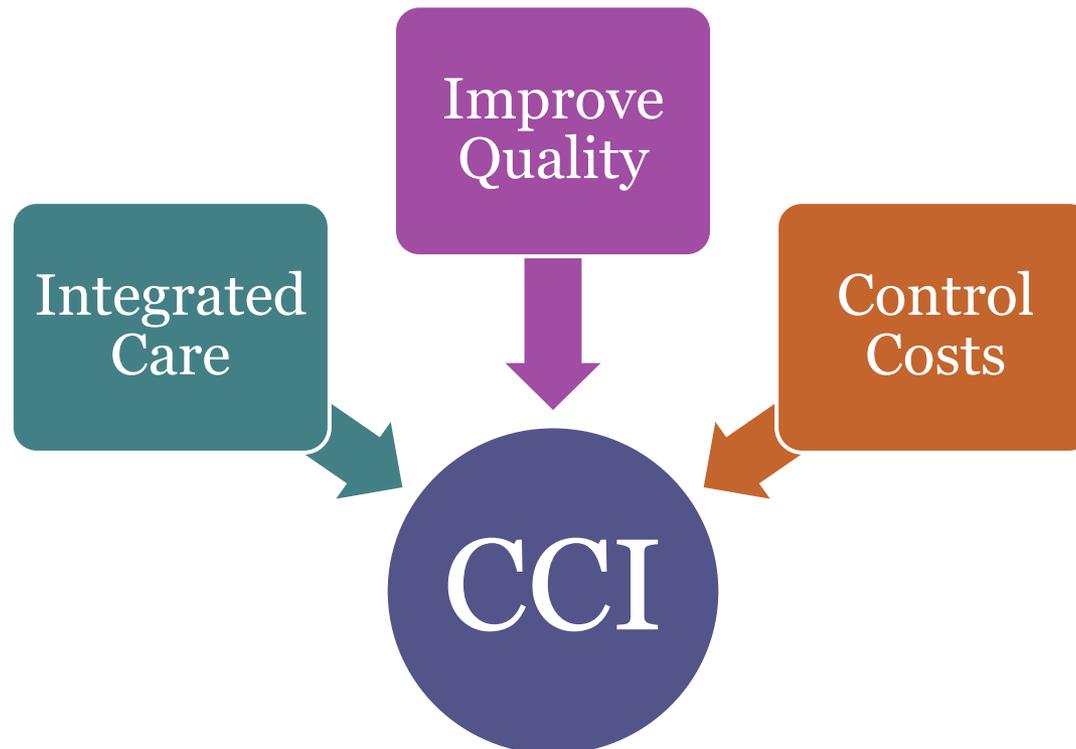


# Background / Overview of the Coordinated Care Initiative (CCI)



# What is CCI?

CCI begins the process of integrating delivery of medical, behavioral, and Long-Term Services and Supports (LTSS)



# What is CCI?

## Governor Brown's Coordinated Care Initiative (CCI)

1. Mandates Long Term Services & Supports as part of Medi-Cal Managed Care.
2. Implements Dual Demonstration in 8 counties in 2013; remaining counties by 2015.
3. Expands Medi-Cal managed care to rural California.



# 1. LTSS Becomes Managed Care Benefit

## Who does this affect?

- All **Medi-Cal Only** and **Dual Eligible beneficiaries** who receive Long Term Services & Supports.
- **Medi-Cal Only** Seniors and People with Disabilities currently mandatorily enrolled in Health Plans.
- **Dual Eligible beneficiaries** will now be mandatorily enrolled in Health Plans for their Medi-Cal benefits starting September 2013.

## 2. Duals Demonstration

### Who Does this affect?

- Individuals who qualify for both Medicare and Medi-Cal.
  - Dual eligible beneficiaries require coordination of a complex range of medical and social services.
    - 37% have both chronic conditions & functional limitations (vs. 9% of Medicare-only beneficiaries).
    - Utilize more Medicare dollars than non-duals.
    - More likely than non-duals to have a chronic condition.
    - High utilizers of Medicaid services: 18% of Medicaid population, 46% of Medicaid spending.
- \* This is where DBH consumers may be impacted as they are included in this population.



## 3. Rural Expansion

### Who does this affect:

- Residents in 28 rural counties that currently only have Medi-Cal Fee-For-Service.
- Scheduled to begin June 2013.
- This refers to other counties outside of San Bernardino that are “rural.”

# What is CCI?

- Enrollment\*
  - Enrollment begins in September 2013.
  - Beneficiary notices to be sent in June 2013.
  - Phased in over 12 months.
  - Mandatory Medi-Cal enrollment.
  - Dual eligible's can opt-out for Medicare benefits.
  - PACE will be an enrollment option.



# Who is impacted by CCI?

- Full scope duals – those who have Medicare Parts A, B, and D coverage and Medi-Cal coverage.
- Populations excluded from the duals demonstration:
  - People with Developmental Disabilities.
  - Children under age 21.
  - Duals who have a share of cost that is not continuously met
  - People with End Stage Renal Disease (ESRD).
  - Home and Community-Based Service 1915 (c) Waiver Enrollees: Nursing Facility/Acute Hospital Waiver Service, HIV/AIDS Waiver Services, Assisted Living Waiver Services, and In-Home Operations Waiver Services.
  - Duals who have other health coverage besides Medicare and Medi-Cal.



# Who is impacted by CCI?

- Populations excluded from the duals demonstration must still enroll in Medi-Cal managed care for LTSS, except:
  - People with Developmental Disabilities who reside in an ICF-DD facility.
  - Children under age 21.
  - Duals who have other health coverage besides Medicare and Medi-Cal.



# Who is impacted by CCI in DBH?

- DBH Consumers with Medicare/ Medi-Cal that do not “opt-out.”
- At this point DBH has approximately 2,200 consumers with an open episode that are eligible to participate in the CAL-Medi-Connect (Duals Demonstration Project).

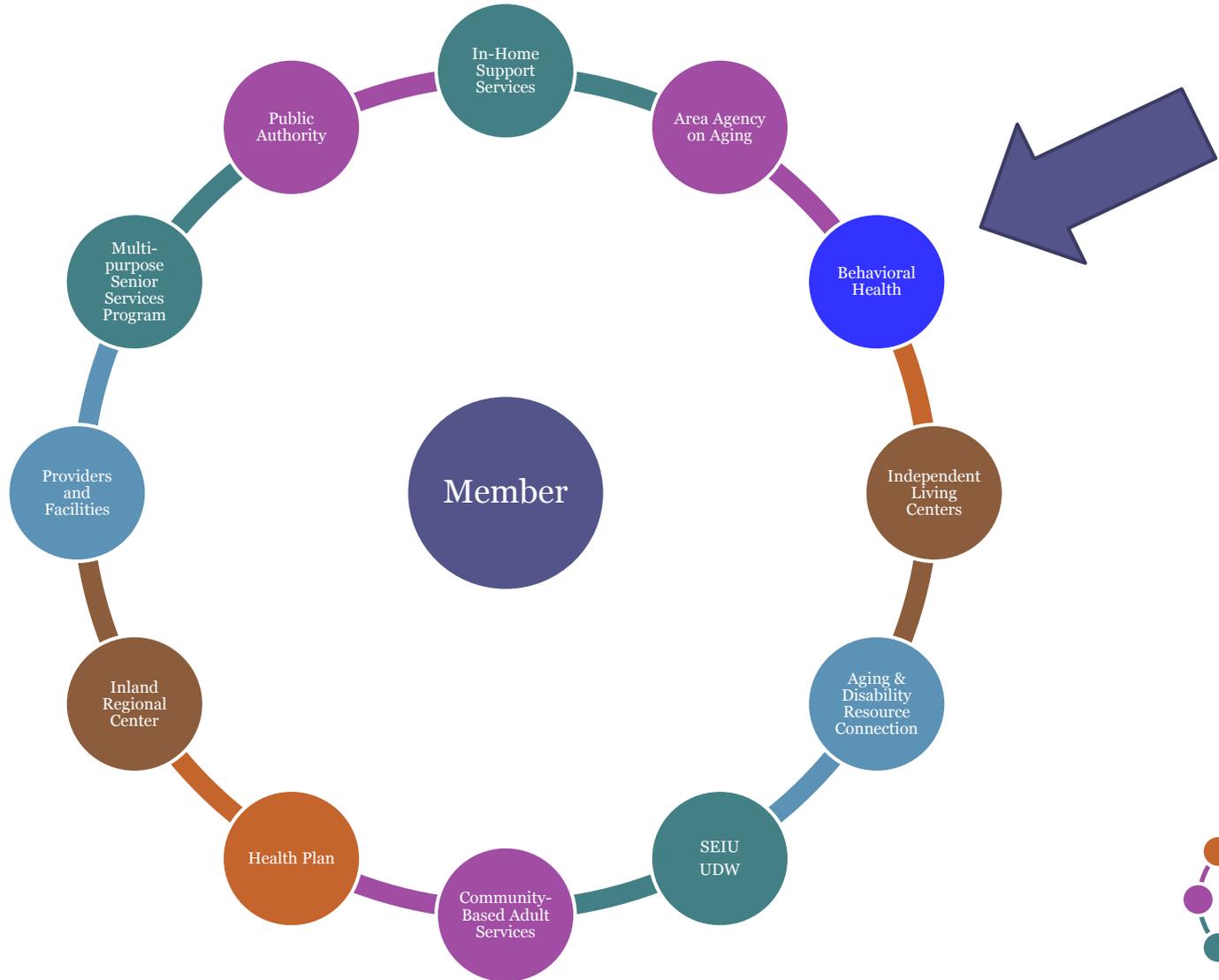


# California Medi-Connect Project Management

- Medi-Cal Managed Care is the lead (IEHP & Molina).
- IEHP & Molina will lead the project and involve critical partners such as DBH.
- IEHP & Molina are hosting an Advisory Committee of which DBH is a member of.



# CCI Stakeholder Advisory Committee



# CCI Stakeholder Advisory Committee Roster

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# Purpose of Committee

To provide a forum for structured input regarding how managed care health plans develop, implement, and operate seamless access and coordination across the full continuum of services – from medical care to Long-Term Services and Supports (LTSS) for dual eligible beneficiaries.



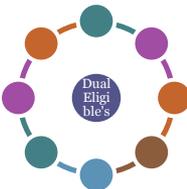
# Role and Responsibility

1. Provide stakeholder input and advice on programming, benefits, access to services, adequacy of grievance process, and consumer protections during the development, implementation, and operations of the demonstration in the Inland Empire.
2. Recommend the most appropriate mechanisms for outreach and education to both consumers and healthcare providers in the Inland Empire community about the demonstration including: eligibility and enrollment, program benefits, and consumer protections.



## Role and Responsibility – cont.

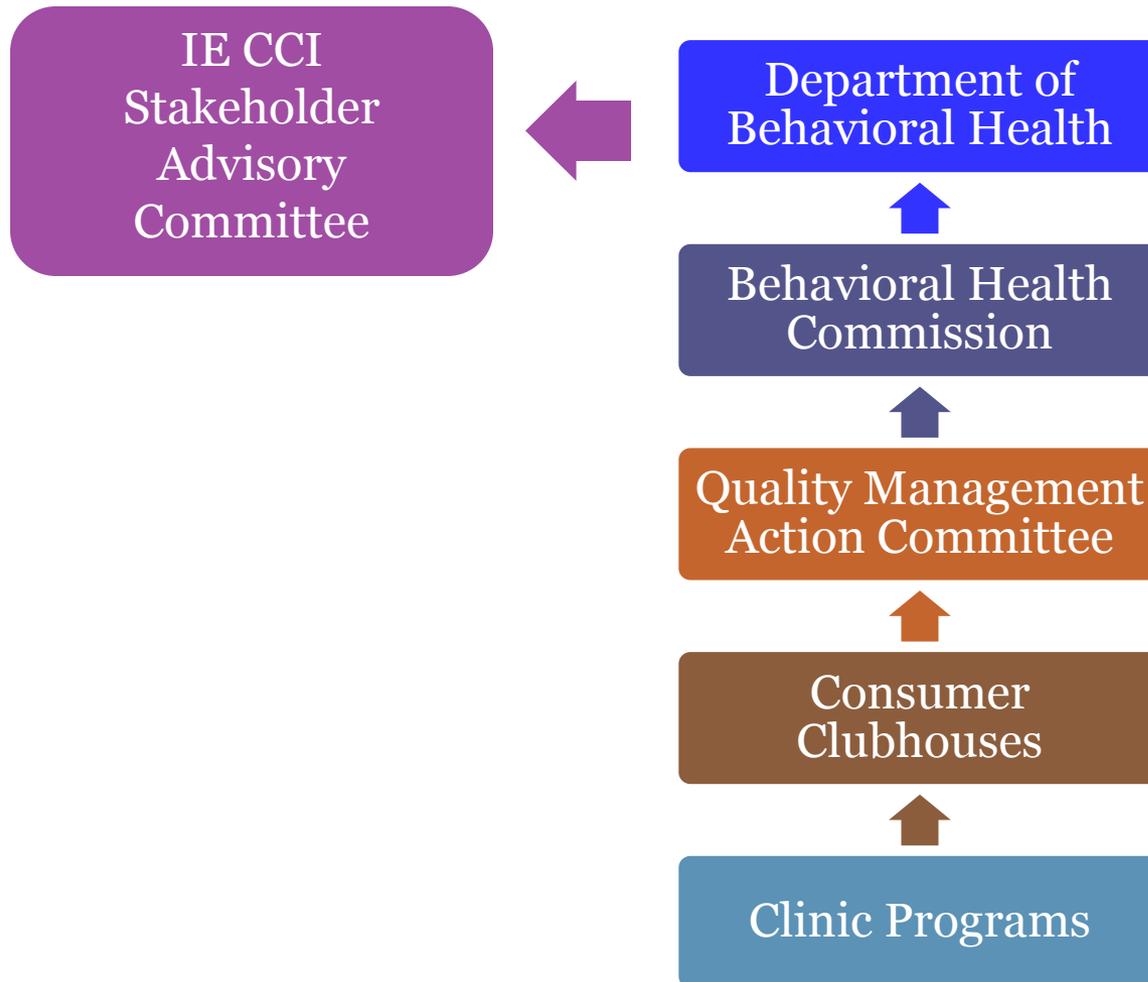
3. Provide feedback on proposals and legislation to the State of California and Centers for Medicare and Medicaid Services through the Health Plans.



# Other Stakeholder Input



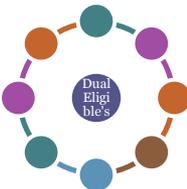
# Other Stakeholder Input



# Other Stakeholder Input

Health Plan  
specific  
Member  
Advisory  
Groups

- **IEHP**
  - Public Policy Participation Committee
  - Persons with Disabilities Workgroup
  - Provider Committee
  - Quality Management Committee
  
- **Molina**
  - Bridge2Access Advisory Committee
  - Member Participation Committee
  - Community Access Committee
  - Provider Operations Management Committee
  - Quality Management Committee



# Next Steps

- Work together with DBH and other partners on specific consumer communications, and program operations.
- Hold several CCI Advisory Committee Meetings:
  - May 21, 2013
  - July 23, 2013
- Continue to communicate at the community, department and individual levels about project elements, challenges and improvements.



# The Bottom Line for DBH Consumers is...

- This project will not impact your current or future services with DBH.
- It will increase communication on your behalf, and with your permission, with IEHP & Molina.
- It will increase your access to primary care services and additional member supports for services like case management, care coordination and other services from IEHP & Molina.



# Thank You!

If you have any questions about the project,  
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